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ZILKA-KOTAB
PC
ZILKA, KOTAB & FEECETM

95 SOUTH MARKET ST., SUITE 420
SAN JOSE, CA 95113

TELEPHONE (408) 971-2573
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FAX COVER SHEET

Date:	December 22, 2004	Phone Number	Fax Number
To:	Examiner C. Laforgia	(703) 872-9306	
From:	Kevin J. Zilka		

Docket No.: NAIIP090/00.176.01

App. No: 09/836,238

Total Number of Pages Being Transmitted, Including Cover Sheet: 17

Message:

Please deliver to Examiner Laforgia.


Thank you,

Kevin J. Zilka

Original to follow Via Regular Mail Original will Not be Sent Original will follow Via Overnight Courier

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December 22, 2004

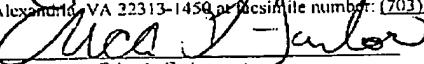
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of)
 Dinsmore et al.) Group Art Unit: 2661
 Application No. 09/836,238) Examiner: Laforgia, C.
 Filed: 04/18/2001) Docket No. NA11P090_00.176.01
 For: SYSTEM AND METHOD FOR)
 KEY DISTRIBUTION IN A HIERARCHICAL)
 TREE) Date: December 22, 2004

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CERTIFICATE OF FACSIMILE
 I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for
 Patents, Alexandria, VA 22313-1450 or facsimile number: (703) 872-9306 on the above date.

Signed: 
 Erica L. Farlow

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL, CLAIMS	30 -	25	.05	X25 = \$	OR	X50 = \$ 250
INDEP CLAIMS	05 -	05	.00	X100 = \$	OR	X200 = \$0
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$0		\$0
			TOTAL	\$ _____		\$250.00

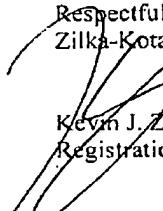


Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.
 Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.



Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees.
 If the required fees are missing or any additional fees are required to facilitate filing the enclosed response,
 please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NA11P090). A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,
 Zilka-Kotab, PC


 Kevin J. Zilka
 Registration No. 41,429

P.O. Box 721120
 San Jose, CA 95172-1120
 Telephone: (408) 971-2573

(Revised 1/26)

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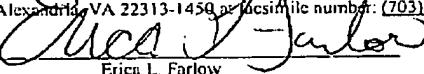
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of)
 Dinsmore et al.) Group Art Unit: 2661
 Application No. 09/836,238) Examiner: Laforgia, C.
 Filed: 04/18/2001) Docket No. NAI1P090_00.176.01
 For: SYSTEM AND METHOD FOR) Date: December 22, 2004
 KEY DISTRIBUTION IN A HIERARCHICAL)
TREE)



COPY

CERTIFICATE OF FACSIMILE
 I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 at facsimile number: (703) 872-9306 on the above date.

Signed: 
 Erica L. Farlow

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After <u>Amendment</u>	Highest Previously <u>Paid For</u>	Present <u>Extra</u>	SMALL ENTITY <u>RATE FEE</u>	OR	LARGE ENTITY <u>RATE FEE</u>
TOTAL CLAIMS	<u>30</u>	<u>25</u>	<u>.05</u>	X25 = \$	OR	X50 = \$ 250
INDEP CLAIMS	<u>05</u>	<u>05</u>	<u>.00</u>	X100 = \$	OR	X200 = \$ 0
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$0		\$0
			TOTAL	\$ _____		\$250.00



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 Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.



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Respectfully submitted,
 Zilka-Kotab, PC

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CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 at facsimile number: (703) 872-9306 on the above date.

Signed:

Erica L. Farlow

AMENDMENT A

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed November 24, 2004, please enter the following amendments believed to place the claims in condition for allowance.

NAI1P090/00.176.01

- 1 -